OMB APPROVAL FORM D QMB Number: SECURITIES AND EXCHANGE pires: November 30, 2001 Washington, D.C. 20 stimated average burden ours per response16.00 FORM D NOTICE OF SALE OF SECURITIES. PURSUANT TO REGULATION D. OCT 15 2002 **SECTION 4(6), AND/OR** FORM LIMITED OFFERING EXEMPTION

| SEC USE | ONLY |
|---------|--------|
| Prefix | Serial |
| | |
| DATE RE | CEIVED |
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| | |

3235-0076

SE

2002

| Name of Offering (check if this is an amendment and name has changed, and indicate the changed in the changed | | |
|--|--|---------------|
| Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Convertible Promissory Notes, Preferred Stock issuable upon conversion thereof, Preferred Stock issuable upon conversion the Preferred Stock issuable upon conversion the Preferred Stock issuable upon conversion the Preferred Stock issuable upon conversion to the Preferred Stock is the Preferred Stock issuable upon co | ommon Stock issuable upon conversion there | eof; Warrants |
| to Purchase Common Stock, Common Stock issuable upon exercise thereof | | |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 | Section 4(6) ULOE | |
| Type of Filing: New Filing Amendment | | |
| A. BASIC IDENTIFICATION | DATA | |
| 1. Enter the information requested about the issuer | | PRUCESS |
| Name of Issuer (check if this is an amendment and name has changed, and indicate | change.) | |
| netVmg, Inc. | • , | OCT 2 4 200 |
| Address of Executive Offices (Number and Street, City, State, Zip Code | Telephone Number (Including Area Code) | D 001 . 20 |
| 47465 Fremont Boulevard, Fremont, CA 94538-6504 | (510) 445-2600 | THOMSON |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) | FINANCIAL |
| (if different from Executive Offices) Same | Same | LIMANOIAL |
| Brief Description of Business | | |
| Internet Technology | | |
| Type of Business Organization | | |
| ☐ corporation ☐ limited partnership, already formed | other (please specify): | |
| ☐ business trust ☐ limited partnership, to be formed | | |
| Month Year | | |
| Actual or Estimated Date of Incorporation or Organization: 0 4 0 0 | | |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abb | reviation for State: | |
| | | |
| CN for Canada; FN for other foreign ju | risdiction) DE | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☑ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Accel VIII L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Accel Partners, 428 University Avenue, Palo Alto, California 94301 Check Box(es) that Apply: Promoter ⊠ Beneficial Owner T Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Blackboard Ventures Inc. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ontario Teachers' Pension Plan Board, 5650 Yonge Street, Ground Floor, Toronto, Ontario M2M 4H5 Canada Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cadeddu, John Business or Residence Address (Number and Street, City, State, Zip Code) c/o Duff Ackerman & Goodrich, Two Embarcadero Center, Suite 2300, San Francisco, CA 94111 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Christoffersen, Tim Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Duff Ackerman & Goodrich II, QP Fund, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Duff Ackerman & Goodrich, Two Embarcadero Center, Suite 2300, San Francisco, CA 94111 Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Hannan, Victor Alan Business or Residence Address (Number and Street, City, State, Zip Code) c/o netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) Johnson, Jeremy T. Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Klinker, James Eric Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Lane, Mike Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) McManus, James T. Business or Residence Address (Number and Street, City, State, Zip Code) McManus Capital LLC, 2979 Westhurst Lane, Oakton, VA 22124-1739 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Parekh, Abhay Business or Residence Address (Number and Street, City, State, Zip Code) c/o netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Robin, Alan Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Roblin, Robert A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Sequeira, Allwyn Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter M Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Wagner, J. Peter Business or Residence Address (Number and Street, City, State, Zip Code) c/o Accel Partners, 428 University Avenue, Palo Alto, California 94301 Check Box(es) that Apply: Promoter Beneficial Owner □ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Wolford, Eric Business or Residence Address (Number and Street, City, State, Zip Code) netVmg, Inc., 47465 Fremont Boulevard, Fremont, CA 94538-6504 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| | | | | В. П | NFORMAT | TION ABO | UT OFFE | RING | | | | |
|--|----------------|---------------|---------------|--------------|---------------|--------------|--------------|--------------|--------------|--------------|----------------|--------------|
| Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | Yes | No | |
| 2. What is | the minim | um investm | ent that will | be accepte | ed from any | individual? |) | | | | \$ <u>1.00</u> | |
| 3. Does the offering permit joint ownership of a single unit? | | | | | | | | | | | Yes | No |
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | | | | |
| Full Name | (Last name | first, if ind | ividual) | | | | | | | | | |
| Business o | r Residence | Address (N | lumber and | Street, Cit | y, State, Zip | Code) | | | | | | |
| Name of A | ssociated B | roker or De | aler | | | | <u> </u> | | | | | |
| | | | | | | | | | | | | |
| - | | | | | | | | IDC1 | fEI 1 | | | All States |
| | | | | | | - | | | | | | [ID] [MO] |
| | | | | _ | _ | _ | | | | | | [PA] |
| | | | | | | | | | | | | [PR] |
| Full Name | (Last name | first, if ind | ividual) | | | | | | | | | |
| Business o | r Residence | Address (N | Number and | Street, Cit | y, State, Zip | Code) | | | | | | |
| Name of A | ssociated B | Broker or De | ealer | | | **** | | | | | <u> </u> | |
| States in W | Vhich Person | n Listed Ha | s Solicited | or Intends t | o Solicit Pu | rchasers | | | | | | |
| • | All States" of | | | - | | | | | | | ••••• | |
| | | | | | | - | | | | | | [ID] |
| | | | | | | | | | | | | [MO] [PA] |
| | | | | | _ | - | | | | | | [PR] |
| Full Name | (Last name | first, if ind | ividual) | | | | | | | | - | |
| | | | | <u> </u> | | | | | | | | |
| Business o | r Residence | Address (1 | lumber and | Street, Cit | y, State, Zip | Code) | | | | | | |
| Name of A | ssociated B | roker or De | aler | | | | | ** <u></u> | | | | |
| | | | | | o Solicit Pu | | | | | | | |
| · · | | | | | | | | | | | | All States |
| [AL] [IL] | [AK] | [AZ] [IA] | [AR] [KS] | [CA] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] | [GA] [MN] | [HI] | [ID] [MO] |
| [IL] [MT] | [IN] [NE] | [NV] | [NH] | [KY] [NJ] | [LA] [NM] | [NY] | [NC] | [MA] [ND] | [MI] [OH] | [MIN] | [MS] [OR] | [MO] [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \bigcap and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt......\$0.00 \$0.00 \$0.00 ☐ Common ☐ Preferred \$3,000,000,00 Partnership Interests \$0.00 \$0.00 Other (Specify \$0.00 Total.......\$4,000,000.00 \$3,000,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 7 \$3,000,000.00 Non-accredited Investors 0 \$0.00 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505....._ Regulation A..... Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees П \$0.00 Printing and Engraving Costs.... \Box \$0.00 Legal Fees..... \boxtimes \$5,000.00 Accounting Fees \$0.00 Engineering Fees \$0.00 Sales Commissions (specify finders' fees separately)..... \$0.00 ____ Other Expenses (identify) П \$0.00 \boxtimes Total \$5,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | C. OFFERING | S PRICE, NUMBER OF INVEST | ORS, EXPENSES | S AND U | SE OF PRO | CEEDS | | |
|----|--|---|-----------------------|--------------|---|--------------|---------------|-------|
| | b. Enter the difference between the ag and total expenses furnished in response proceeds to the issuer." | to Part C - Question 4.a. This diffe | erence is the "adjust | sted gros | | | \$2,995,00 | 00.00 |
| 5. | Indicate below the amount of the adjusted the purposes shown. If the amount for any left of the estimate. The total of the payr forth in response to Part C - Question 4.b a | purpose is not known, furnish an esti- tents listed must equal the adjusted gr | mate and check the | box to th | e | | | |
| | Zacasa in to | | | | Paymen Office Director Affilia | rs, s, & | Payme Oth | |
| | Salaries and fees | | | 🔲 | \$0.00 | | \$0.00 | |
| | Purchase of real estate | | | 🗀 | \$0.00 | | \$0.00 | |
| | Purchase, rental or leasing and insta | lation of machinery and equipment. | | 🔲 | \$0.00 | | \$0.00 | |
| | Construction or leasing of plant buil | | \$0.00 | | \$0.00 | | | |
| | Acquisition of other business (include | - | | | | | | |
| | offering that may be used in exchange | | | _ | | | | |
| | issuer pursuant to a merger) | | | _ | <u>\$0.00</u> | | <u>\$0.00</u> | |
| | Repayment of indebtedness | | | | <u>\$0.00</u> | | | |
| | Working capital | | | | \$0.00 | \boxtimes | \$2,995,00 | 00.00 |
| | Other (specify): | | | | | | | |
| | | | | | \$0.00 | | \$0.00 | |
| | Column Totals | | | | \$0.00 | | \$2,995,00 | 00.00 |
| | Total Payments Listed (column totals added) | | | | \boxtimes | \$2,995,000 | | |
| | | | | | | | | |
| | | D. FEDERAL SIGN | ATURE | | <u></u> | | | |
| si | ne issuer has duly caused this notice to be gnature constitutes an undertaking by the formation furnished by the issuer to any n | ssuer to furnish to the U.S. Securiti | es and Exchange (| Commiss | | | | |
| | suer (Print or Type) etVmg, Inc. | Signature | (1) Ha | U) | Date Octo | ber //, 2002 | | |
| N | ame of Signer (Print or Type) | Title of Signer (Print or T | ype) | | | | | |
| N | Iichael W. Hall | Secretary | | | | | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)